				_	
Fill in this	information to identi	fy the case:		ntered 02/22/22 11:56:20	Desc Mair
Debtor 1	WILLIAM	GREGORY	CHARLES	1 of 1	
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	BARBARA		CHARLES		
) First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the	: Western District of	Pennsylvania		
Case number	16-24015 CMB				

Official Form 423

Certification About a Financial Management Course

12/15

If you are an individual, you must take an approved course about personal financial management if:

- you filed for bankruptcy under chapter 7 or 13, or
- you filed for bankruptcy under chapter 11 and § 1141 (d)(3) applies.

In a joint case, each debtor must take the course. 11 U.S.C. §§ 727(a)(11) and 1328(g).

After you finish the course, the provider will give you a certificate. The provider may notify the court that you have completed the course. If the provider does not notify the court, then Debtor 1 and Debtor 2 must each file this form with the certificate number before your debts will be discharged.

- If you filed under chapter 7 and you need to file this form, file it within 60 days after the first date set for the meeting of creditors under § 341 of the Bankruptcy Code.
- If you filed under chapter 11 or 13 and you need to file this form, file it before you make the last payment that your plan requires or before you file a motion for a discharge under § 1141(d)(5)(B) or § 1328(b) of the Bankruptcy Code. Fed. R. Bankr. P. 1007(c).

In some cases, the court can waive the requirement to take the financial management course. To have the requirement waived, you must file a motion with the court and obtain a court order.

Part 1: Tell the Court About the Required Course

You must check one:										
☐ I completed an approved course in personal financial management:										
Date I took the course		<u>02/16/2022</u> MM / DD / YYYY								
Name of approved provider		Advantage Credit Counseling Service, Inc.								
Certificate number		01721-PAW-DE-036334735								
I am not required to complete a course in personal financial management because the court has granted my motion for a waiver of the requirement based on (check one):										
	Incapacity.		I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.							
	Disability.	My physical disability causes me to be unable to complete a course in personal financial management in person, by phone, or through the internet, even after I reasonably tried to do so.								
	Active duty.	I am currently on active military duty in a military combat zone.								
	Residence.	I live in a district in which the United States trustee (or bankruptcy administrator) has determined that the approved instructional courses cannot adequately meet my needs.								
2:	Sign Here									
I certify that the information I have provided is true and correct.										
/s/Ba	arbara Cha	rles		Barbara Charles	Date 02/22/2022					
Signature of debtor named on certificate			ificate	Printed name of debtor	MM / DD / YYYY					
	I con Date Nam Cert I am waiv	I completed an an an Date I took the condition Name of approved Certificate number I am not required waiver of the required Incapacity. Disability. Active duty. Residence. Sign Here I certify that the info/s/Barbara Chain	I completed an approved completed an approved completed an approved provider Certificate number I am not required to complete waiver of the requirement because of the requirement by phone, Disability. My physical by phone, Active duty. I am curred approved Residence. I live in a capproved. Sign Here	I completed an approved course in personal finant. Date I took the course O2/16/2022 MM / DD / YYYYY Name of approved provider Advantage Credit. Certificate number O1721-PAW-DE-Course in personal waiver of the requirement based on (check one): Incapacity. I have a mental illness or a mental about finances. Disability. My physical disability causes mental about finances. Active duty. I am currently on active military dutory phone, or through the internet, of the course in personal waiver of the requirement based on (check one): Incapacity. I have a mental illness or a mental about finances. Disability. My physical disability causes mental about finances. I live in a district in which the Unite approved instructional courses care. Sign Here I certify that the information I have provided is true and distributed in the course of the	Date took the course Date took the course O2/16/2022 MM / DD / YYYY					